

**Amendment No. 7 to HB4011**

**Windle  
Signature of Sponsor**

<b>FILED</b>
Date _____
Time _____
Clerk _____
Comm. Amdt. _____

**AMEND Senate Bill No. 3895\***

**House Bill No. 4011**

by adding the following new section immediately preceding the last section and by renumbering the subsequent section accordingly:

SECTION \_\_\_\_\_. Tennessee Code Annotated, Title 71, Chapter 5, Part 1, is amended by adding the following provisions:

71-5-149.

(a) During the month of July 2006, there shall be a thirty (30) day open enrollment period in TennCare for persons of any age who were medically eligible for TennCare under eligibility standards in effect on January 1, 2005, who were involuntarily disenrolled from TennCare during the period of May through December 2005, and who at the time of disenrollment had been diagnosed with kidney disease. The department of human services shall process all applications filed during that period and, if an applicant is found eligible, the applicant shall be enrolled in the TennCare Standard program, without regard to whether the department completes its review of the application after the conclusion of the month during which the application was submitted.

(b) No provision of this section shall in any way be construed to limit, impair or prohibit any person otherwise eligible from establishing eligibility for medical assistance under TennCare Medicaid or any other medical assistance program under the provisions of this chapter.

(c) If the commissioner of finance and administration determines that implementing the provisions of this section requires a new federal waiver, an amendment to an existing federal waiver, or any other form of approval from the federal centers for medicare and medicaid services, the commissioner is promptly directed to seek such approvals on an expedited basis.

